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J.D.
10-14-03

PATENT
Attorney Docket No. SBC-002CP
(7620/6)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Culliss CONFIRMATION NO.: 2049
SERIAL NO.: 09/839,840 GROUP NO.: 2645
FILING DATE: April 23, 2001 EXAMINER: Hoosain, Allan
TITLE: Answering Machine Detection for Voice Message Delivery Method
and System

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any document(s) referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 746-9195 on this 25th day of July, 2003.

Irja Zarembok
Irja Zarembok

Mail Stop Corrected Filing Receipt
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Request for Corrected Filing Receipt (1 pg.); and
3. Marked-up copy of the Replacement Filing Receipt (1 pg.).

2657747

TRANSMITTAL FORM

Application Serial Number	09/839,840
Filing Date	April 23, 2001
First Named Inventor	Culliss
Group Art Unit	2645
Examiner Name	Hoosain, Allan
Attorney Docket No.	SBC-002CP
Confirmation No.	2049
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

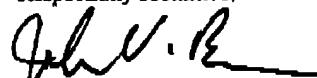
<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <input type="checkbox"/> Formal Drawing(s) 	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <ul style="list-style-type: none"> <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] 	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) 	<input type="checkbox"/> Status Inquiry <ul style="list-style-type: none"> <input type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Terminal Disclaimer <ul style="list-style-type: none"> <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application 	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 (1 pg.) <input checked="" type="checkbox"/> Additional Enclosures: (please identify below) <input checked="" type="checkbox"/> Request for Corrected Filing Receipt (1 pg.) <input checked="" type="checkbox"/> Marked-up copy of the Replacement Filing Receipt (1 pg.)
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations 	<input type="checkbox"/> Small Entity Statement <ul style="list-style-type: none"> <input type="checkbox"/> CD(s) for large table or computer program 	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance <ul style="list-style-type: none"> <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate) 	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 		

CORRESPONDENCE ADDRESS

SIGNATURE BLOCK

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Respectfully submitted,

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2657753

PATENT
 Attorney Docket No. SBC-002CP
 (7620/6)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	Culliss	CONFIRMATION NO.:	2049
SERIAL NO.:	09/839,840	GROUP NO.:	2645
FILED:	April 23, 2001	EXAMINER:	Hoosain, Allan
TITLE:	Answering Machine Detection for Voice Message Delivery Method and System		

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 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the Replacement Filing Receipt received from the Patent Office for the above-identified application for which issuance of a Corrected Filing Receipt is respectfully requested.
2. There is an error with respect to the following data, which is:

incorrectly entered

and/or

omitted

<i>Error In</i>	<i>Correct Data</i>
1. <input checked="" type="checkbox"/> Applicant's name	1. Gary Alan Culliss
2. <input type="checkbox"/> Applicant's address	2.
3. <input type="checkbox"/> Title	3.
4. <input type="checkbox"/> Filing Date	4.
5. <input type="checkbox"/> Serial Number	5.
6. <input type="checkbox"/> Foreign/PCT Application Re:	6.
7. <input type="checkbox"/> Other (Domestic Priority Data)	7.

Respectfully submitted,



John V. Bianco
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2657736



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/839,840	04/23/2001	2645	364		5	20	2

SBC-002 CP

Patent Administrator
 Testa Hurwitz & Thibeault LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

CONFIRMATION NO. 2049

REPLACEMENT FILING RECEIPT



'OC000000010398243'

Date Mailed: 07/01/2003

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Gary Alan Culliss, Hampton, NH;
Gary Alan Culliss

Domestic Priority data as claimed by applicant

This application is a CIP of 09/751,931 01/02/2001

Foreign Applications

If Required, Foreign Filing License Granted: 06/15/2001

Projected Publication Date: Not Applicable

Non-Publication Request: No

Early Publication Request: No

Title

Answering machine detection for voice message delivery method and system

Preliminary Class

379



UNITED STATES PATENT AND TRADEMARK OFFICE

Page 1 of 2600

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F08/104

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Bib Data Sheet

CONFIRMATION NO. 2049

SERIAL NUMBER 09/839,840	FILING OR 371(c) DATE 04/23/2001 RULE	CLASS 379	GROUP ART UNIT 2645	ATTORNEY DOCKET NO.
APPLICANTS Gary Alan Culliss, Hampton, NH;				
** CONTINUING DATA ***** This application is a CIP of 09/751,931 01/02/2001				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/15/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NH	SHEETS DRAWING 5	TOTAL CLAIMS 20
Verified and Acknowledged Examiner's Signature	Initials	INDEPENDENT CLAIMS 2		
ADDRESS Patent Administrator Testa Hurwitz & Thibeault LLP High Street Tower 125 High Street Boston, MA 02110				
TITLE Answering machine detection for voice message delivery method and system				
FILING FEE RECEIVED 364	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		